

## Telehealth Technology Grant Announcement Q&A

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On March 7, 2016, the Maryland Health Care Commission (MHCC) released an announcement for grant applications (Grant ID MHCC 16-012) entitled, *Telehealth Technology Pilot- Round Four*.<sup>1</sup> The MHCC received the questions below from potential applicants regarding this announcement. The MHCC is making available our responses to questions received from potential applicants. This document will be updated as we receive additional questions.

1. **Question:** Are hospices eligible to apply for these funds (specific to our Maryland patients)?

**Answer:** Hospices are eligible to apply for this grant if they are able to meet the requirements specified in the Announcement for Grant Applications. Among other things, the grantees must be able to demonstrate the impact of using telehealth to support value-based care delivery in primary care where the applicant(s) aim to expand patient access to health services tailored to the needs of different communities and patient populations.

2. **Question:** Does a program that utilizes daily phone calls to check on patients at home qualify under the definition provided in the Announcement for Grant Applications as “Telehealth”?

**Answer:** A program that uses phone calls without any other technology does not qualify as telehealth for the purposes of this grant. Telehealth is the delivery of health education and services using telecommunications and related technologies in coordination with a health care practitioner. Telehealth includes the following technologies: real-time audio video conferencing; store-and-forward; remote monitoring; and mobile health.

3. **Question:** Does improving the health status/comfort of our patients qualify as “improved population health”?

**Answer:** Improving the health status/comfort of patients may qualify as improved population health. We encourage the applicant to identify specific health outcomes it will aim to improve as part of the telehealth project. This can be specified within the application as part of the identified clinical goals.

4. **Question:** Does telehealth implemented within at individual’s home qualify for this grant program?

**Answer:** Yes. Telehealth implemented within a person’s home qualifies for this grant program.

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<sup>1</sup> The announcement is available here:

[http://mhcc.maryland.gov/mhcc/pages/hit/hit\\_telemedicine/documents/TLMD\\_Use\\_Case\\_Grant\\_Announ\\_Round4\\_20160208.pdf](http://mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicine/documents/TLMD_Use_Case_Grant_Announ_Round4_20160208.pdf)

5. **Question:** Will applicants be permitted to provide supplemental data to support their proposal after the submission date of April 12, 2015?

**Answer:** Applicants may submit additional data used to support their proposal provided the information is emailed to [lynn.albizo@maryland.gov](mailto:lynn.albizo@maryland.gov) by close of business on April 22<sup>nd</sup> and provided that the intent to submit additional data, including information about what data will be submitted, is clearly stated on the original proposal submitted on or before April 12<sup>th</sup>.

6. **Question:** If the grant is for \$90,000, does this mean I need an in-kind match of \$180,000 or \$45,000?

**Answer:** If the grant is for \$90,000, then the recipient must provide a match of at least \$180,000. The match should not be all in-kind services. Match funding may include actual expenses for materials, equipment or services needed to implement the grant.

7. **Question:** Could you please clarify the limitation for the 20 percent in-kind match requirements?

**Answer:** Below is a clarification regarding limitations on the source of matches:

- You may budget up to 20 percent of the match funds using in-kind in-house or consultant IT technical hours; or
- You may budget up to 20 percent of the match funds using clinical hours that are not otherwise reimbursed; or
- The above two limitations combined, may not exceed 20 percent of the entire match.

For example, if a proposal budgets \$180,000 in match dollars, then the applicant may allot up to \$36,000.00 of in-kind services for IT technical services and clinical hours that are not otherwise reimbursable. There are no limitations for budgeting services that are not clinical or in-kind IT services such as project planning, data collection, report writing, materials or equipment.